

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/563963

FILING DATE

01-10-06

APPLICANT(S)

Article 34

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4		3				
5		3				
6		3				
7		3				
8		3				
9		3				
10	1					
11		1				
12		1				
13		3				
14		3				
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49						
50						
TOTAL IND.	4		↓		↓	↓
TOTAL DEP.	26	←		←	←	←
TOTAL CLAIMS	30	████	████	████	████	████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.		←		←	←	←
TOTAL CLAIMS		████	████	████	████	████